

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 3
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ C C00487470
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 19 / 2016
Mailing Address 2001 L St., NW Suite 600		Amount 405.25
City Washington	State DC	Zip Code 20036
Purpose of Expenditure tv ad production costs (from advance line 21)	Category/ Type	Transaction ID : SE.7212 Date of Disbursement or Obligation MM / DD / YYYY 04 / 19 / 2016
Name of Federal Candidate KIP E TOM	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 228255.25		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 19 / 2016
Mailing Address 2001 L St., NW Suite 600		Amount 19.53
City Washington	State DC	Zip Code 20036
Purpose of Expenditure internet communications (from advance line 21)	Category/ Type	Transaction ID : SE.7213 Date of Disbursement or Obligation MM / DD / YYYY 04 / 19 / 2016
Name of Federal Candidate KIP E TOM	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 228274.78		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	424.78
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Adam Rozansky

[Electronically Filed]

Date

MM / DD / YYYY
04 / 20 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) CLUB FOR GROWTH ACTION		FEC IDENTIFICATION NUMBER ▼ C C00487470
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Club for Growth		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 19 / 2016
Mailing Address 2001 L St., NW Suite 600		Amount 153.34
City Washington	State DC	Zip Code 20036
Purpose of Expenditure press release (from advance line 21)	Category/ Type	Transaction ID : SE.7214 Date of Disbursement or Obligation MM / DD / YYYY 04 / 19 / 2016
Name of Federal Candidate KIP E TOM	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 228428.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Creative Response Concepts		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 19 / 2016
Mailing Address 2760 Eisenhower Ave. 4th floor		Amount 80.00
City Alexandria	State VA	Zip Code 22314
Purpose of Expenditure press release distribution	Category/ Type	Transaction ID : SE.7215 Date of Disbursement or Obligation MM / DD / YYYY 04 / 19 / 2016
Name of Federal Candidate KIP E TOM	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought 228508.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	233.34
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Red Sea, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 19 / 2016	
Mailing Address 4550 Montgomery Ave., North Tower Ste. 906		Amount 227850.00	
City Bethesda	State MD	Zip Code 20814	Transaction ID : SE.7210
Purpose of Expenditure tv ad air buy, production costs		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 04 / 18 / 2016
Name of Federal Candidate KIP E TOM		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/ Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	227850.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	228508.12

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